



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony in OPPOSITION to H.C.R. 54
Urging the Department of Health to Require That Medical Care Professionals Provide
Information on Prenatal Screening and Testing for Down Syndrome to all Pregnant
Women

REPRESENTATIVE Della AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: March 11, 2015

Room Number: 329

1 **Fiscal Implications:** The Department of Health has no funds or staff to support the
2 requirements of this Resolution.

3 **Department Testimony:** The Department of Health opposes H.C.R. 54 urging the Department
4 require medical care professionals provide information on prenatal screening and testing for
5 Down syndrome to all pregnant women.

6 The practice of providing information about prenatal screening for Down syndrome is
7 already recommended by the American Congress of Obstetricians and Gynecologists (ACOG).
8 In 2007, ACOG revised its guidelines to recommend that all pregnant women be offered fetal
9 chromosomal screening. This screening includes screening for Down syndrome. Even though
10 ACOG recommends offering this screening to all pregnant women, religion, and cultural
11 traditions may influence a provider to choose not to discuss all prenatal screening and testing
12 options. Therefore, it should not be a requirement for these providers to offer screening or
13 testing that does not follow their and their patients' religious or cultural beliefs.

14 ACOG does not recommend offering or discussing diagnostic testing for Down syndrome
15 with all pregnant women. In practice, only women who are over 35 years old and/or have a
16 screening test indicating an increased risk of carrying a baby with Down syndrome are provided
17 information about diagnostic testing for Down syndrome. If providers were required to discuss
18 all the screening and testing options available to all pregnant women, it would be an incredible
19 amount of information that a pregnant woman would have to comprehend and most of which she
20 would not need.

1 There is no statewide reporting or tracking of prenatal screening test results or outcomes
2 of pregnancies that had prenatal screening or testing. Developing such a system/program would
3 require a mandate and at least \$100,000 per year of funding.

4 Thank you for the opportunity to testify on this measure.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 10, 2015 5:00 PM
To: HLTtestimony
Cc: garret@alohapregnancy.com
Subject: Submitted testimony for HCR54 on Mar 11, 2015 09:00AM

HCR54

Submitted on: 3/10/2015

Testimony for HLT on Mar 11, 2015 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Garret Hashimoto	Aloha Pregnancy Care n Counseling Center	Comments Only	Yes

Comments: Greetings,My name is Garret Hashimoto,President of the Aloha Pregnancy Care n Counseling Center. I believe mothers with potential Down Syndrome babies should receive more,and more accurate information regarding the child in their womb.I have heard that this week is No More Spousal abuse and sex crimes against women week.I'd really like to know the statistics for these abuses because statistics show that 90% of women thought to have a child with Down Syndrome have abortions,terminating the pregnancy.Further statistics also show a 32% of wrong diagnosis.Please help to protect these children.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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***American Congress of Obstetricians and
Gynecologists***

District VIII, Hawaii (Guam & American Samoa) Section

Lori Kamemoto, MD, MPH, FACOG, Chair
94-235 Hanawai Circle, #1B
Waipahu, Hawaii 96797



Wednesday, March 11, 2015
9:00 AM
Conference Room 329

To: House Committee on Health
Representative Della Au Bellati, Chair
Representative Richard P. Creagan, Vice Chair

From: Lori Kamemoto, MD, MPH, FACOG, Chair
Greigh Hirata, MD, FACOG, Legislative & Vice-Chair

**Re: HCR 54, HR 24 – Urging the Department of Health to Require
that Medical Care Professionals Provide Information on Prenatal
Screening**

**Position: OPPOSE – national medical recommendations for
prenatal screening are already in place, unnecessary legislation of
medical care**

Dear Chair Bellati, Vice-Chair Creagan and Health Committee Members:

The American Congress of Obstetricians and Gynecologists (ACOG), Hawaii Section opposes HCR54 and HR24. National ACOG policy already recommends that prenatal screening for Down's syndrome be offered to all pregnant women - "Ideally, all women should be offered aneuploidy screening before 20 weeks of gestation, regardless of maternal age." [ACOG Practice Bulletin no. 77, January 2007, reaffirmed 2013]

Since offering prenatal screening is already the standard of care, Hawaii ACOG feels that these resolutions are unnecessary and potentially confusing legislation of medical care. There also appear to be data errors contained within these resolutions. Prenatal screening standards change as more tests and further studies become available, and it would be difficult for resolutions/laws or non-clinical staff to keep up with these changes in medical care.

Hawaii ACOG opposes these resolutions as prenatal screening is already the standard of medical care, and are unnecessary legislation of medical care.

Thank you for the opportunity to testify.

HOUSE OF REPRESENTATIVES
THE TWENTY-EIGHTH LEGISLATURE
REGULAR SESSION OF 2015

COMMITTEE ON HEALTH

Rep. Della Au Belatti, Chair
Rep. Richard P. Creagan, Vice Chair

Rep. Mark J. Hashem	Rep. Marcus R. Oshiro
Rep. Jo Jordan	Rep. Beth Fukumoto Chang
Rep. Bertrand Kobayashi	Rep. Andria P.L. Tupola
Rep. Dee Morikawa	

NOTICE OF HEARING

DATE: Wednesday, March 11, 2015
TIME: 9:00 a.m.
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

HCR 54 / HR 24 /
Status / Status

URGING THE DEPARTMENT OF HEALTH TO REQUIRE THAT MEDICAL CARE PROFESSIONALS PROVIDE INFORMATION ON PRENATAL SCREENING AND TESTING FOR DOWN SYNDROME TO ALL PREGNANT WOMEN. HLT, FIN

Submitted in **SUPPORT** by: Fern Mossman, HI 96734 HD 50

I support this Resolution and ask that you too would give it your support.

Thank you,
Fern Mossman

creagan1 - Dannah

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 09, 2015 11:09 AM
To: HLTtestimony
Cc: mendezj@hawaii.edu
Subject: *Submitted testimony for HCR54 on Mar 11, 2015 21:00PM*

HCR54

Submitted on: 3/9/2015

Testimony for HLT on Mar 11, 2015 21:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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TESTIMONY to House Committee on Health

HCR 54 and HR 24

Wednesday, March 11, 2015

9:00 AM -- State Capitol House Conference Room 329

Submitted in **OPPOSITION** by: Mary Smart, Mililani, HI 96789

Chair Belatti; Vice-Chair Creagan and Committee Members:

1. I most strongly **OPPOSE** this bill. The legislature needs to stop practicing medicine. We are still a free country, protected by the Constitution, and should have "Choice" regarding the doctor we select. Doctor's must be allowed to practice medicine using their own judgment of what is best for their individual patients based on sound medical information. We don't need any more mandates telling doctors how to do their jobs.
2. It is true, and a sad state of affairs that [we kill 90%](#) of babies with Down syndrome while they are still in the womb. The only rationale is that these babies are less than perfect and have been deemed unworthy to live. Instead of targeting the remaining 10% who survive this period of their development, it would be better if the legislature developed a means to decrease that 90% figure down to zero percent. Instead of instilling fear into parents, doctors should be offering hope and solutions such as the mother who wrote about her findings regarding "less than perfect" children found [here](#).
3. Will section 321-331, Hawaii Revised Statutes be revised to ensure pregnant women are told these babies could have very fulfilling lives and bring [joy](#) to their families? Will the mandate include the requirement to tell pregnant women that there are many levels of ability displayed by individuals with Down disease? Some have been [actors](#) and have filled other jobs supporting themselves. I am providing a link to an article titled "8 People with Down Syndrome Who are Making History" [here](#). Pregnant women must also be told that having a child with Down syndrome doesn't have to be a catastrophic event unless society treats these children and families in an unwelcoming manner?
4. The more we trend toward having the most perfect children, through termination of a child with physical problems while he/she is still in utero, or by selecting for In-Vitro fertilization on the embryo's of the correct sex/eye color/hair color etc, the more prevalent child abuse occurs in society. The [National Council on Child Abuse & Family Violence](#) reports that: "Child abuse and neglect is a national problem which has increased to epidemic proportions in the United States." When the "perfect" child is born, parents with high expectations can be disappointed upon discovering that each child comes with his/her own inherent problems, whether it is physical like the Down syndrome child, emotional, behavioral, or mental. Every child has unique challenges to overcome, and the issues that accompany Down syndrome children may be minor compared to other problems detected after birth.

5 Somewhere along the line we have become a society where children have become accessories for parents to "show off" and from which parents obtain their own self-esteem. Children change the dynamic of the family and for at least two years the child becomes the central focus of their primary care givers. Children, whatever their circumstance, are individual human beings, who should be cherished regardless of deformity or infirmity. The government should accept this and not turn the Down syndrome child into a pariah that must be detected so that it can be removed and destroyed before birth. We need to develop a better attitude toward less than perfect children (that would be everyone of us) and stop turning parenting into a [competition](#).

6. When the Down syndrome child has been eradicated from society, which children will be targeted next? Will we start eliminating living children (and adults) afflicted with life-long illnesses/diseases/disabilities/deformities? In a 1993 article [Taking Life: Humans](#) published in Practical Ethics, 2nd edition, Cambridge, 1993, pp. 175-217, philosopher Peter Singer advocates killing children after birth. He states: "I do not deny that if one accepts abortion on the grounds provided in Chapter 6, the case for killing other human beings, in certain circumstances, is strong." As stated in one [biography](#), "His belief that newborns should not be considered a person until 30 days after their birth, and his allowance that physicians should have the right to kill some disabled babies, has drawn condemnation from anti-abortion leaders from around the world." Is that where the legislature is heading with these resolutions?

6. **Do not pass either resolution.** It is unjust to target innocent life in the womb because of irrational perceptions of perfection/imperfection. We are all imperfect, yet each of us have a strong belief that our lives have value. Each life has value and should be protected.